UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

EMMANUEL UGWU,

Plaintiff,

-against-

UNITED STAES OF AMERICA,

Defendant.

19-CV-9239 (VSB)

ORDER DIRECTING PAYMENT OF FEE OR IFP APPLICATION AND PRISONER AUTHORIZATION

VERNON S. BRODERICK, United States District Judge:

Emmanuel Ugwu, currently incarcerated at Moshannon Valley Correctional Center, in Philipsburg, Pennsylvania, and acting *pro se*, brings this application styled as a motion for the return of property under Fed. R. Crim. P. 41(g). Ugwu was convicted in *United States v Ugwu*, No. 1:15-CR-417-1 (VSB) (S.D.N.Y. Sept. 29, 2017), and sentenced to 60 months' imprisonment. Because the criminal case is closed, this application was opened as a new civil action. *See Ugwu*, No. 1:15-CR-417-1 (VSB) (ECF No. 56) (order directing Clerk of Court to open this matter as a new civil action).

To proceed with a civil action in this Court, a prisoner must either pay \$400.00 in fees – a \$350.00 filing fee plus a \$50.00 administrative fee – or, to request authorization to proceed *in forma pauperis* (IFP), that is, without prepaying fees, submit a signed IFP application and a prisoner authorization. *See* 28 U.S.C. §§ 1914, 1915. The Prison Litigation Reform Act requires the Court to collect the \$350.00 filing fee in installments deducted from a prisoner's account when a prisoner proceeds IFP. *See* 28 U.S.C. § 1915(b)(1). A prisoner seeking to proceed in this Court without prepaying fees must therefore authorize the Court to withdraw these payments from his account by filing a "prisoner authorization," which directs the facility where the

prisoner is incarcerated to deduct the \$350.00 filing fee¹ from the prisoner's account in installments and to send to the Court certified copies of the prisoner's account statements for the past six months. *See* 28 U.S.C. § 1915(a)(2), (b).

Plaintiff submitted the application for the return of property without paying the filing fees or submitting a completed IFP application and prisoner authorization. Accordingly, within thirty days of the date of this order, Plaintiff must either pay the \$400.00 in fees or submit the attached IFP application and prisoner authorization forms. If Plaintiff submits the IFP application and prisoner authorization, they should be labeled with docket number 19-CV-9239 (VSB).

CONCLUSION

The Clerk of Court is directed to mail a copy of this order to Plaintiff, and note service on the docket. Within thirty days of the date of this order, Plaintiff must either pay the \$400.00 in fees or submit the attached IFP application and prisoner authorization forms. If Plaintiff fails to comply with this order within the time allowed, the action will be dismissed without prejudice.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore *in forma pauperis* status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444–45 (1962) (holding that appellant demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED

Dated: October

October 9, 2019

New York, New York

Vernon S. Broderick

United States District Judge

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¹ The \$50.00 administrative fee for filing a civil action does not apply to persons granted IFP status under 28 U.S.C. § 1915.

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

	Il name of the plaintiff or petitioner applying (each person ust submit a separate application))	CV		`					
	-against-	(Provide docket number, if available; if filing this with your complaint, you will not yet have a docket number.)							
(fu	ll name(s) of the defendant(s)/respondent(s))								
	APPLICATION TO PROCEED WITHO	OUT PREPAYING F	EES OR COSTS						
an	m a plaintiff/petitioner in this case and declare that I d I believe that I am entitled to the relief requested in occeed in forma pauperis (IFP) (without prepaying fees ce:	this action. In support of	f this application to	S					
1.	Are you incarcerated?	☐ No (If "No,"	go to Question 2.)						
	Do you receive any payment from this institution? Yes No								
	Monthly amount:								
	If I am a prisoner, see 28 U.S.C. § 1915(h), I have attached to this document a "Prisoner Authorization" directing the facility where I am incarcerated to deduct the filing fee from my account in installments and to send to the Court certified copies of my account statements for the past six months. See 28 U.S.C. § 1915(a)(2), (b). I understand that this means that I will be required to pay the full filing fee.								
2.	Are you presently employed?	☐ No							
	If "yes," my employer's name and address are:								
	Gross monthly pay or wages:								
	If "no," what was your last date of employment?								
	Gross monthly wages at the time:								
3.	In addition to your income stated above (which you should not repeat here), have you or anyone else living at the same residence as you received more than \$200 in the past 12 months from any of the following sources? Check all that apply.								
	(a) Business, profession, or other self-employment(b) Rent payments, interest, or dividends	Yes Yes	☐ No ☐ No						

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Telephone Number		E	E-mail Address (if a	vaila	ble)				
Ad	dress C	iity	Sta	te		Zip Code			
Na	me (Last, First, MI)	F	Prison Identificatio	n # (i	f incar	cerated)			
Da	ted	S	Signature						
	claration: I declare under penalty of per tement may result in a dismissal of my	, ,	above informat	ion i	is true	e. I unders	tand	that a	false
8.	Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable:								
7.	List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):								
6.	Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:								
5.	Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:								
4.	How much money do you have in cas	sh or in a chec	king, savings, o	or in	mate	account?			
	If you answered "No" to all of the que	estions above,	explain how yo	ou a	re pa	ying your	expe	nses:	
	If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.							f	
	(e) Gifts or inheritances(f) Any other public benefits (unemp food stamps, veteran's, etc.)(g) Any other sources	loyment, socia	al security,		Yes Yes Yes			No No No	
	(c) Pension, annuity, or life insurance (d) Disability or worker's compensat	1 0			Yes Yes			No No	
	(c) Pension annuity or life incurance	navmente			Voc			No	

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

(full name of the	plaintiff/petitioner)		CV		() (
-against-			(Provide docket number, if available; if filing this with your complaint, you will not yet have a docket number.)					
(full name(s) of t	ne defendant(s)/responden	it(s))						
	PR	ISONER AUTH	ORIZATION					
By signing be	elow, I acknowledge	that:						
the full f	because I filed this action as a prisoner, I am required by statute (28 U.S.C. § 1915) to pay the full filing fees for this case, even if I am granted the right to proceed <i>in forma pauperis</i> (IFP), that is, without prepayment of fees;							
` '	(2) the full \$350 filing fee will be deducted in installments from my prison account, even if my case is dismissed or I voluntarily withdraw it.							
I authorize tl	ne agency holding m	e in custody to:						
(from m	1) send a certified copy of my prison trust fund account statement for the past six months (from my current institution or any institution in which I was incarcerated during the past six months);							
	(2) calculate the amounts specified by 28 U.S.C. § 1915(b), deduct those amounts from my prison trust fund, and disburse those amounts to the Court.							
	zation applies to any court to which my c	· .	e custody I may be tra erred.	nsferre	d and t	o any		
Date		-	Signature					
Name (Last, First, MI)			Prison Iden	tification	#			
Address		City	Sta	nte	Zip Co	de		

SDNY Rev. 10/26/16

¹ A "prisoner" is "any person incarcerated or detained in any facility who is accused of, convicted of, sentenced for, or adjudicated delinquent for, violations of criminal law or the terms or conditions of parole, probation, pretrial release, or diversionary program." 28 U.S.C. § 1915(h).